

County: Taylor

Facility ID: 3820

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RIB LAKE HEALTH CARE CENTER
650 PEARL STREET, PO BOX 308

RIB LAKE 54470 Phone:(715) 427-5291

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/05): 75

Total Licensed Bed Capacity (12/31/05): 75

Number of Residents on 12/31/05: 60

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Corporation

Skilled

No

Yes

Yes

64

Age, Gender, and Primary Diagnosis of Residents (12/31/05)				Length of Stay (12/31/05)		%	
Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		38.3	
Developmental Disabilities	3.3	Under 65	3.3	1 - 4 Years		40.0	
Mental Illness (Org./Psy)	33.3	65 - 74	10.0	More Than 4 Years		21.7	
Mental Illness (Other)	1.7	75 - 84	36.7			-----	
Alcohol & Other Drug Abuse	0.0	85 - 94	48.3			100.0	
Para-, Quadra-, Hemiplegic	0.0	95 & Over	1.7	-----			
Cancer	0.0		-----	Full-Time Equivalent			
Fractures	3.3		100.0	Nursing Staff per 100 Residents			
Cardiovascular	25.0	65 & Over	96.7	(12/31/05)			
Cerebrovascular	6.7		-----	-----			
Diabetes	8.3	Gender	%	RNs		10.6	
Respiratory	3.3		-----	LPNs		7.9	
Other Medical Conditions	15.0	Male	23.3	Nursing Assistants,			
	-----	Female	76.7	Aides, & Orderlies			
	100.0		-----			39.3	
			100.0				

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care					
			Per Diem				Per Diem				Per Diem				Per Diem				Total Resi-	% Of
Level of Care	No.	%	Diem (\$)	No.	%	Diem (\$)	No.	%	Diem (\$)	No.	%	Diem (\$)	No.	%	Diem (\$)	No.	%	Diem (\$)	dents	All
Int. Skilled Care	0	0.0	0	6	12.5	134	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	6	10.0
Skilled Care	4	100.0	211	41	85.4	116	1	100.0	169	6	100.0	159	0	0.0	0	1	100.0	211	53	88.3
Intermediate	---	---	---	1	2.1	99	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.7
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0		48	100.0		1	100.0		6	100.0		0	0.0		1	100.0		60	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/05				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	12.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	8.0	Bathing	6.7	50.0	43.3	60
Other Nursing Homes	5.3	Dressing	35.0	63.3	1.7	60
Acute Care Hospitals	72.0	Transferring	41.7	53.3	5.0	60
Psych. Hosp.-MR/DD Facilities	1.3	Toilet Use	36.7	51.7	11.7	60
Rehabilitation Hospitals	0.0	Eating	61.7	31.7	6.7	60
Other Locations	0.0	*****				
Total Number of Admissions	75	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	6.7		Receiving Respiratory Care	8.3
Private Home/No Home Health	30.5	Occ/Freq. Incontinent of Bladder	41.7		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	13.4	Occ/Freq. Incontinent of Bowel	26.7		Receiving Suctioning	0.0
Other Nursing Homes	13.4				Receiving Ostomy Care	1.7
Acute Care Hospitals	9.8	Mobility			Receiving Tube Feeding	3.3
Psych. Hosp.-MR/DD Facilities	1.2	Physically Restrained	0.0		Receiving Mechanically Altered Diets	18.3
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care			Other Resident Characteristics	
Deaths	31.7	With Pressure Sores	3.3		Have Advance Directives	80.0
Total Number of Discharges		With Rashes	5.0		Medications	
(Including Deaths)	82				Receiving Psychoactive Drugs	61.7

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	85.3	82.2	1.04	86.9	0.98	86.0	0.99	88.1	0.97
Current Residents from In-County	83.3	71.1	1.17	73.2	1.14	74.9	1.11	77.6	1.07
Admissions from In-County, Still Residing	25.3	17.9	1.42	20.6	1.23	19.6	1.29	18.1	1.40
Admissions/Average Daily Census	117.2	152.6	0.77	123.3	0.95	139.3	0.84	162.3	0.72
Discharges/Average Daily Census	128.1	153.4	0.84	123.8	1.03	139.6	0.92	165.1	0.78
Discharges To Private Residence/Average Daily Census	56.3	75.7	0.74	53.9	1.04	64.3	0.87	74.8	0.75
Residents Receiving Skilled Care	98.3	95.4	1.03	96.4	1.02	96.4	1.02	92.1	1.07
Residents Aged 65 and Older	96.7	94.2	1.03	93.0	1.04	92.9	1.04	88.4	1.09
Title 19 (Medicaid) Funded Residents	80.0	72.3	1.11	69.6	1.15	69.8	1.15	65.3	1.22
Private Pay Funded Residents	10.0	16.4	0.61	20.3	0.49	19.0	0.53	20.2	0.50
Developmentally Disabled Residents	3.3	0.8	4.24	0.7	4.99	0.7	4.67	5.0	0.67
Mentally Ill Residents	35.0	28.0	1.25	37.2	0.94	34.7	1.01	32.9	1.06
General Medical Service Residents	15.0	26.7	0.56	19.6	0.77	21.9	0.68	22.8	0.66
Impaired ADL (Mean)	39.0	46.8	0.83	46.7	0.83	47.4	0.82	49.2	0.79
Psychological Problems	61.7	55.5	1.11	57.3	1.08	59.0	1.04	58.5	1.05
Nursing Care Required (Mean)	5.0	6.9	0.72	6.7	0.74	7.2	0.70	7.4	0.67